

# Preventive Health and Health Services Block Grant

## Indiana

### Emergency Department Phone Home

"The plan was, and is, to use multiple best practices, bundling many of the resources available, applying the principles of case management, and then bringing all that to the patient in a series of one-on-one contacts over time."

Connie Kerrigan, Program Manager  
Parkview Health System

#### Public Health Problem (Issue)

After seeing too many patients return to the emergency department (ED) repeatedly because of their asthma, Community Nursing staff at Parkview Health System took action. With technical assistance from ISDH Chronic Disease staff, and seed money from the PHHS Block Grant the Parkview Asthma Call-Back Program (ACBP) was formed.

#### Taking Action (Intervention)

The Parkview Randallia Hospital campus is located in the highest poverty area of Ft. Wayne, Indiana . A community health survey of low-income adults in the hospital's service area found that 15.4% of low-income adults reported having asthma or asthma symptoms, and the nurses were keenly aware that asthma was one of the most frequent reasons for ED visits.<sup>1</sup> As the interest in addressing the needs of this population grew, the Parkview Community Nursing staff found that many of the patients who visited the ED were seeking quick relief asthma treatment, were without a medical home and/or lacked the knowledge or resources to manage their asthma effectively.

The ACBP was designed to be pro-active and move beyond rescue care. If an individual sought ED care for an asthma related issue, the Community Nursing staff would identify them, attempt to reach them by phone, and initiate the intervention. When asked about the program, Connie Kerrigan, program manager, explained, "The plan was, and is, to use multiple best practices, bundling many of the resources available, applying the principles of case management, and then bringing all that to the patient in a series of one-on-one contacts over time."

During the first telephone conversation, program staff assess well-being and offer assistance in many forms. They review discharge instructions, determine access to medication and medical services, provide educational materials and counseling, and even offer home visits to assess environmental triggers.

Additional follow-up occurs at three and six months post-discharge. Program staff often refer patients to Parkview physicians, and encourage them to develop a medical home with regular follow up to improve asthma management.

#### Impact

Early evidence indicates that participants in the Call Back program experience significantly fewer ED visits than before their participation. Of the 162 participants who completed a survey after one year in the program, 84% reported no additional hospitalization after their initial event, and 59% reported missing no days of work or school and had no trouble carrying out normal activities because of their asthma since entering the call-back program.<sup>2</sup>

The intervention was found to be cost-effective, a key benefit to the health system. The average cost to treat per ED encounter dropped from \$3,763 in 2009 to \$1,393 in 2012, while improving the quality of care for their patients.<sup>3</sup> Parkview Health Systems has since expanded the program to its other ED facilities and incorporated components into their EMR system for use by Parkview physicians. Since an economic benefit was demonstrated, Parkview is able to sustain the intervention without further need of block-grant support.

**Footnotes**

1. Community Nursing Services. (2008). *Community Needs Assessment—Ft. Wayne*. Ft. Wayne, IN: Parkview Health.
2. Community Nursing Services. (2012). *Parkview Call-Back Program: Evaluation*. Ft. Wayne, IN: Parkview Health.
3. Indiana State Department of Health (2012). *Parkview Call-Back Program: Economic Evaluation*. Indianapolis: ISDH.

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**Healthy People Objective**  
Emergency Medical Services

**PHHS Block Grant Funding**  
75-99% - Primary source of funding

**PHHS Block Grant Coordinator**  
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**For more information on the  
PHHS Block Grant, go to**  
[www.cdc.gov/phhsblockgrant](http://www.cdc.gov/phhsblockgrant)

**For more information on  
Healthy People, go to** [www.healthypeople.gov](http://www.healthypeople.gov)

**PHHS Block Grant Supports**  
**Indiana Healthy People Priorities**

The PHHS Block Grant provides flexible funding that states can use to prevent and control chronic diseases, respond quickly to outbreaks of infections and waterborne diseases, and address their specific public health needs. States can align their programs with health objectives from [Healthy People](#).

Indiana uses its funds to address 14 health objective priorities, including

- Cardiovascular Health.
- Community Water Fluoridation.
- Accredited Public Health Agencies.
- Public Health Agency Quality Improvement Program.
- Health Improvement Plans.

For a complete list of funded health objectives, go to  
<http://www.cdc.gov/phhsblockgrant/stateHPprior.htm>.